

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|------------|-------------|-----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | <i>B/M</i> | <i>1073</i> | <i>8/24/01</i> |
| RESPONSE FORMALITY REVIEW | <i>pl</i> | <i>1030</i> | <i>10-16-01</i> |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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156551
 6/20/01
 10-16-01
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